



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 6232

<b>SERIAL NUMBER</b> 10/007,047	<b>FILING or 371(c) DATE</b> 12/06/2001 <b>RULE</b>	<b>CLASS</b> 536	<b>GROUP ART UNIT</b> 1642	<b>ATTORNEY DOCKET NO.</b> UM-06692	
<b>APPLICANTS</b> Theodora Ross, Ann Arbor, MI; Ikuko Mizukami, Ann Arbor, MI; Dinesh Rao, Ypsilanti, MI; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/335,276 11/15/2001 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 01/24/2002					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /BRANDON J FETTEROLF/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance BF Initials	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWINGS</b> 22	<b>TOTAL CLAIMS</b> 83	<b>INDEPENDENT CLAIMS</b> 10
<b>ADDRESS</b> Casimir Jones, S.C. 440 Science Drive Suite 203 Madison, WI 53711 UNITED STATES					
<b>TITLE</b> HIP1 cancer markers					
<b>FILING FEE RECEIVED</b> 1296	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		